



Bib Data Sheet



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SERIAL NUMBER 09/488,327	FILING DATE 01/20/2000 RULE _____	CLASS 455	GROUP ART UNIT 2749	ATTORNEY DOCKET NO. HOLMQVIST-1
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APPLICANTS

Ryan S. Holmqvist, Bethlehem, PA ;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 03/07/2000**

**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 2	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

Mark E Kelley
 Hitt Chwang and Gaines PC
 Suite 225
 275 West Campbell Road
 Richardson, TX 75080

TITLE

System And Method For Providing Ancillary Page Information

FILING FEE RECEIVED 708	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 4272

SERIAL NUMBER 09/488,327	FILING DATE 01/20/2000 RULE	CLASS 340	GROUP ART UNIT 2635	ATTORNEY DOCKET NO. HOLMQVIST-1
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APPLICANTS

Ryan S. Holmqvist, Bethlehem, PA;

** CONTINUING DATA *None* *EDT*** FOREIGN APPLICATIONS *None* *SDA***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 03/07/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 2	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>BB</i> Examiner's Signature _____ Initials _____				

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27964

TITLE

System And Method For Providing Ancillary Page Information

FILING FEE RECEIVED 708	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees _____ <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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